0.5		PARTI	B - FEE(S) TRAN	SMITTAL			
Compression and ser	this form, toget	pplicable		Mail Stop ISSU Commissioner fo P.O. Box 1450 Alexandria, Virgi (571)-273-2885		_	
INSTRUCTIONS: This appropria All further indicated the same maintenance fee notifica	for should be used in the spondence including below or directed out tions.	for transmitting the ISS ng the Patent, advance of nerwise in Block 1, by (UE FEE and PUBLIC orders and notification a) specifying a new co	ATION FEE (if requi of maintenance fees w orrespondence address;	red). Blocks 1 through 5 ill be mailed to the curre and/or (b) indicating a se	should be completed where nt correspondence address as parate "FEE ADDRESS" for	
		lock 1 for any change of address)		Note: A certificate of a Fee(s) Transmittal. This papers. Each additional	mailing can only be used s certificate cannot be used paper, such as an assignr	for domestic mailings of the d for any other accompanying ment or formal drawing, must	
27612 AVERILL & V 8244 PAINTER WHITTIER, CA 12/21/2006 ENYALEU2	/ARN AVE. 390602	/2006	·	Cert I hereby certify that thi States Postal Service w addressed to the Mail transmitted to the USP1	Stop ISSUE FEE addres (O (571) 273-2885, on the		
T20 40 50				Edgar W. Av	erill, Jr.	(Depositor's name)	
01 FC:2501	0.0 0.5		Fogas W	Crient	(Signature)		
				December 19	, 2006	(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/749,847 01/02/2004 Jesus Martinez 134/133 9447							
TITLE OF INVENTIO MEMBRANE WOUND			ER DEVICE HAVING	G A SEMI-PERMEAE	BLE TUBULAR HOLLO	OW FIBER	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PAID ISSUE	FEE TOTAL FEE(S) DU	JE DATE DUE	
nonprovisional .	YES	\$700	\$0	: \$0	\$700	(02/02/2007 Cal	
EXAMINER		ART UNIT	CLASS-SUBCLASS	7			
·FORTUNA, ANA M		1723	210-321790				
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			(1) the names of u or agents OR, alter (2) the name of a s registered attorney 2 registered patent	reprinting on the patent front page, list e names of up to 3 registered patent attorneys ents OR, alternatively, e name of a single firm (having as a member a ered attorney or agent) and the names of up to stered patent attorneys or agents. If no name is no name will be printed. 1 Edgar W. Averill, Jr. Kenneth L. Green 2			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						•	
Spectrum Laboratories, Inc. Rancho Dominguez, CA 90220							
Please check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent):	Individual 🔀 Cor	rporation or other private g	group entity Government	
	are submitted: To small entity discount put of Copies	permitted)	A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).				
5. Change in Entity State a. Applicant claim	tus (from status indicated s SMALL ENTITY statu		☐ b. Applicant is no	longer claiming SMAL	L ENTITY status. See 37	CFR 1.27(g)(2).	
NOTE: The Issue Fee and interest as shown by the	d Publication Fee (if requestreed Sta	uired) will not be accepte	d from anyone other the	an the applicant; a regis	tered attorney or agent; or	the assignee or other party in	
Authorized Signature	61. 1	[weil!]	/		cember 19, 200		
Typed or printed name Edgar W. Averill, Jr.			Registration No. 24,752				
Alexandria, Virginia 223	13-1450.	NOT SEND TEES ON	COMPLETED FORMS	O TO THIS ADDRESS.	e public which is to file (a inutes to complete, includ nments on the amount of rademark Office, U.S. De SEND TO: Commissione isplays a valid OMB control.	nd by the USPTO to process) ing gathering, preparing, and time you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450, ol number.	

PTOL-85 (Rev. 07/06) Approved for use through 04/30/2007.